

CRIME VICTIMS REPARATIONS BOARD  
MINUTES

MEETING DATE: April 9, 2019

MEMBERS PRESENT: Ms. Linda Gautier, Ms. Rena Hebert, Ms. Lisa Kiper, Ms. Audrey Thibodeaux, Ms. Amanda Tonkovich, Ms. Tameka White

MEMBERS ABSENT: Mr. Gary "Stitch" Guillory, Ms. Angela Henderson, Ms. Carla Shorty, Ms. Carolyn Stapleton, Ms. Catalene Theriot

STAFF PRESENT: Robert Wertz, Carla Trahan, Margaret Watson

GUESTS PRESENT: Erich Duchmann, David "Jeddie Smith," Stacey Bennett, Victor Smith

I. CALL TO ORDER

Ms. Tonkovich called the Crime Victims Reparations Board meeting for the date of April 9, 2019 to order at 9:23 a.m.

II. APPROVAL OF MINUTES OF PREVIOUS MEETING

Ms. White made a motion to approve the minutes of the previous meeting. Ms. Hebert seconded the motion and the motion passed unanimously.

III. APPEALS

None

IV. EMERGENCY CONFIRM/DENY

Ms. Kiper made a motion to approve the emergency rulings for the previous month and to waive repayment of the emergency awards. Ms. White seconded the motion and the motion passed unanimously.

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PARISH	CVR #	RESOLUTION
Ascension	ASCE18-328	Claim Approved. Payment of \$818.35 approved to OLOLRMC.
Ascension	ASCE19-300	Claim Approved. Payment of \$400.00 approved to EBRPCO SANE Program.
Ascension	ASCE19-301	Claim Approved. Payment of \$550.00 approved to EBRPCO SANE Program.
Assumption	ASSU18-002	Emergency Award Payments confirmed.
Assumption	ASSU19-300	Claim Approved. Payment of \$400.00 approved to EBRPCO SANE Program.
Assumption	ASSU19-301	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
Avoyelles	AVOY15-003	Claims Approved. Payment of \$391.82 approved to Acadian Ambulance.
Avoyelles	AVOY15-004	Eligibility Approved. Payment of \$563.34 approved to Acadian Ambulance. Payment of \$78.65 approved to Pathology Associates of Mid-LA. Payment of \$4,829.28 approved to Rapides Regional Medical Ctr.
Avoyelles	AVOY15-005	Eligibility Approved. Payment of \$942.10 approved to Acadian Ambulance. Payment of \$252.38 approved to NES Louisiana, Inc. Payment of \$742.50 approved to Rapides Medical Ctr Emergency. Payment of \$448.06 approved to Rapides RMC. Payment of \$93.50 approved to Radiology Specialty Group. Payment of \$3,093.19 approved to Avoyelles Hospital.
Avoyelles	AVOY15-006	Eligibility Approved. Payment of \$629.75 approved to NES Louisiana, Inc. Payment of \$93.50 approved to Radiology Specialty Group. Payment of \$2,303.95 approved to Avoyelles Hospital.
Beauregard	BEAU19-300	Claim Approved. Payment of \$1,000.00 approved to Vernon Parish Coroner's Office.
Bossier	BOSS15-005	Eligibility Approved. Payment of \$71.50 approved to DBA WK Emergency Dept. Grp. Payment of \$176.00 approved to Bossier Parish EMS. Payment of \$3280.00 approved to LSUHSC-S Clinics. Payment of \$522.50 approved to Bossier City Fire Dept/EMS.
Bossier	BOSS15-009	Eligibility Approved. Payment of \$71.50 approved to DBA WK Emergency Dept. Group. Payment of \$1,664.79 approved to Willis Knighten Bossier.

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Bossier	BOSS16-011	Eligibility Approved. Payment of \$1,800.00 approved to the claimant.
Bossier	BOSS19-004	Emergency Award Confirmed.
Bossier	BOSS19-300	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-301	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-302	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-303	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-304	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-305	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-306	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-307	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-308	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Bossier	BOSS19-309	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Caddo	CADD15-012	Claim Approved. Payment of \$5,000.00 approved to University Health S'port.
Caddo	CADD15-015	Claim Approved. Payment of \$1,037.85 approved to LSUHSC-S Clinics. Payment of \$1,625.62 approved to University Health Shreveport.
Caddo	CADD15-016	Eligibility Approved. Payment of \$1,452.00 approved to LSUHSC-C Clinics. Payment of \$300.00 approved to City of Shreveport. Payment of \$8,246.02 approved to University Health S'port.
Caddo	CADD15-020	Eligibility Approved. Payment of \$194.00 approved to City of Shreveport EMS. Payment of \$2,522.00 approved to LSUHSC-S Clinics. Payment of \$6,984.00 approved to University Health S'port.
Caddo	CADD15-022	Eligibility Approved. Payment of \$1,087.74 approved to University Health S'port. Payment of \$495.00 approved to City of Shreveport EMS.
Caddo	CADD15-027	Eligibility Approved. Payment of \$8,195.43 approved to University Health – Shreveport. Payment of \$147.33 approved to City of Shreveport EMS.

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		Payment of \$1,657.24 approved to LSUHSC-S Clinics.
Caddo	CADD15-036	Eligibility Approved. Payment of \$1,488.45 approved to LSUHSC-S Clinics. Payment of \$550.00 approved to University Health Shreveport. Payment of \$50.00 approved to claimant.
Caddo	CADD15-038	Eligibility Approved. Payment of \$3,971.55 approved to LSUHSC-S Clinics.
Caddo	CADD15-039	Eligibility Approved. Payment of \$971.30 approved to LSUHSC-S Clinics.
Caddo	CADD15-049	Eligibility Approved. Payment of \$2,922.29 approved to University Health – Shreveport. Payment of \$2,450.00 approved to claimant.
Caddo	CADD15-052	Eligibility Approved. Payment of \$2,680.82 approved to University Health Shreveport. Payment of \$629.75 approved to LSUHSC S’port Faculty Group.
Caddo	CADD15-056	Eligibility Approved. Payment of \$137.50 approved to University Health – Shreveport.
Caddo	CADD15-065	Eligibility Approved. Payment of \$366.30 approved to DBA WK Emergency Dept. Grp.
Caddo	CADD15-076	Claim Approved. Payment of \$10,000.00 approved to University Health S’port.
Caddo	CADD16-031 N. Jones	Eligibility Approved. Payment of \$784.00 approved to claimant.
Caddo	CADD16-031 M. Jackson	Claim Approved. Payment of \$3,716.00 approved to claimant.
Caddo	CADD16-045	Eligibility Approved. Payment of \$5,000.00 approved to claimant.
Caddo	CADD18-016	Emergency Award Confirmed.
Caddo	CADD18-055	Eligibility Approved. Payment of \$9,500.00 approved to claimant.
Caddo	CADD18-389	Claim Approved. Payment of \$1,204.70 approved to Willis Knighten North.
Caddo	CADD19-003	Emergency Award Confirmed.
Caddo	CADD19-010	Emergency Award Confirmed.
Caddo	CADD19-300	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Caddo	CADD19-301	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Caddo	CADD19-302	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.

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Caddo	CADD19-303	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Caddo	CADD19-304	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Caddo	CADD19-305	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Caddo	CADD19-306	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Calcasieu	CALC14-026	Claim Approved. Payment of \$28.00 approved to claimant. Payment of \$35.66 approved to Alexandria Neurosurgical Clinic. Payment of \$191.59 approved to Rapides Regional Specialty Care. Payment of \$322.38 approved to Access Radiology.
Calcasieu	CALC15-001	Claim Approved. Payment of \$2,533.30 approved to West Cal-Cam Hospital. Payment of \$926.20 approved to Sulphur Emergency Group. Payment of \$391.82 approved to Acadian Ambulance.
Calcasieu	CALC15-012	Eligibility Approved. Payment of \$10,000.00 approved to Lake Charles Memorial Hosp.
Calcasieu	CALC15-016	Eligibility Approved. Payment of \$5,509.90 approved to West Cal-Cam Hospital. Payment of \$775.50 approved to Sulphur Surgical Clinic.
Calcasieu	CALC15-034	Eligibility Approved. Payment of \$68.75 approved to West Cal-Cam Hospital Payment of \$125.00 approved to Acadian Ambulance.
Calcasieu	CALC15-055	Eligibility Approved. Payment of \$10,000.00 approved to Lake Charles Memorial.
Calcasieu	CALC15-124	Eligibility Approved. Payment of \$153.00 approved to Christy Ammons, DDS. Payment of \$1,636.75 approved to claimant.
Calcasieu	CALC16-020	Eligibility Approved. Payment of \$96.95 approved to claimant. Payment of \$111.21 approved to LCMC.
Calcasieu	CALC16-026	Eligibility Denied. Illegal Activity.
Calcasieu	CALC16-043	Eligibility Approved. Payment of \$1926.83 approved to claimant Payment of \$669.90 approved to Lake Charles Memorial Hosp.
Calcasieu	CALC18-016	Eligibility Approved.
Calcasieu	CALC18-034	Eligibility Deferred awaiting a supplemental police report.
Claiborne	CLAI18-001	Eligibility Denied – Felony History.
Claiborne	CLAI19-300	Claim Approved.

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		Payment of \$500.00 approved to Forensic Nurse Examiners.
DeSoto	DESO19-300	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
DeSoto	DESO19-301	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
DeSoto	DESO19-302	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
DeSoto	DESO19-303	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
East Baton Rouge	EBAT15-010	Eligibility Approved. Payment of \$1,202.23 approved to Our Lady of the Lake RMC.
East Baton Rouge	EBAT15-018	Eligibility Approved. Payment of \$2,174.00 approved to Carney Mackey Funeral Home. Payment of \$2,326.00 approved to the claimant.
East Baton Rouge	EBAT15-139	Eligibility Approved. Payment of \$3,111.71 approved to the claimant.
East Baton Rouge	EBAT16-037	Eligibility Approved. Payment of \$5,000.00 approved to the claimant.
East Baton Rouge	EBAT16-048	Eligibility Approved. Payment of \$4,500.00 approved to the claimant.
East Baton Rouge	EBAT16-066	Eligibility Approved. Payment of \$5,000.00 approved to the claimant.
East Baton Rouge	EBAT16-075	Eligibility Approved. Payment of \$1,176.00 approved to the claimant.
East Baton Rouge	EBAT16-078	Eligibility Approved. Payment of \$4,500.00 approved to the claimant.
East Baton Rouge	EBAT16-080	Eligibility Approved. Payment of \$5,000.00 approved to the claimant.
East Baton Rouge	EBAT16-095	Eligibility Approved. Payment of \$4,500.00 approved to the claimant.
East Baton Rouge	EBAT-17-017	Eligibility Approved. Payment of \$1,779.00 approved to A. Wesley Funeral Home.
East Baton Rouge	EBAT18-064	Claim Approved. Payment of \$150.00 approved to Brandon P. Romano.
East Baton Rouge	EBAT18-092	Eligibility Approved. Payment of \$1,654.83 approved to the claimant.
East Baton Rouge	EBAT18-492	Claim Approved. Payment of \$550.00 approved to EBRPCO SANE Program. Payment of \$1,786.26 approved to Our Lady of the Lake RMC.
East Baton Rouge	EBAT18-497	Claim Approved. Payment of \$400.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT18-505	Claim Approved.

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		Payment of \$1,793.00 approved to Our Lady of the Lake RMC.
East Baton Rouge	EBAT18-506	Claim Approved.
East Baton Rouge	EBAT18-510	Claim Approved. Payment of \$550.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-004	Claim Approved with a 50% penalty for contribution. Payment of \$3,069.38 approved to the claimant.
East Baton Rouge	EBAT19-006	Emergency Confirmed.
East Baton Rouge	EBAT19-007	Emergency Confirmed.
East Baton Rouge	EBAT19-008	Emergency Confirmed.
East Baton Rouge	EBAT19-009	Emergency Confirmed.
East Baton Rouge	EBAT19-011	Emergency Confirmed.
East Baton Rouge	EBAT19-012	Emergency Confirmed.
East Baton Rouge	EBAT19-014	Emergency Confirmed.
East Baton Rouge	EBAT19-015	Emergency Confirmed.
East Baton Rouge	EBAT19-017	Emergency Confirmed.
East Baton Rouge	EBAT19-019	Emergency Confirmed.
East Baton Rouge	EBAT19-020	Emergency Confirmed.
East Baton Rouge	EBAT19-301	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-302	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-303	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-304	Claim Approved. Payment of \$400.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-305	Claim Approved. Payment of \$400.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-306	Claim Approved. Payment of \$550.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-307	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-308	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-309	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-310	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-311	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.

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East Baton Rouge	EBAT19-312	Claim Approved. Payment of \$829.45 approved to Our Lady of the Lake RMC.
East Baton Rouge	EBAT19-315	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-316	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-317	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-318	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-319	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-320	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-321	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-322	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-323	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-324	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-325	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-326	Claim Approved. Payment of \$1,965.73 approved to Our Lady of the Lake RMC.
East Baton Rouge	EBAT19-327	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-328	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-329	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-330	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-331	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-332	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-333	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-334	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.

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East Baton Rouge	EBAT19-335	Claim Approved. Payment of \$650.00 approved to EBRPCO SANE Program.
East Baton Rouge	EBAT19-336	Claim Approved. Payment of \$500.00 approved to EBRPCO SANE Program.
Iberia	IBER15-012	Claim Approved. Payment of \$134.75 approved to Radiology Assoc of Acadiana. Payment of \$357.50 approved to Main Street Emergency Group. Payment of \$2,881.73 approved to Iberia Medical Center. Payment of \$61.33 approved to Iberia Medical Center. Payment of \$101.75 approved to Acadian Ambulance. Payment of \$300.00 approved to Acadian Ambulance. Payment of \$80.00 approved to the claimant.
Iberia	IBER19-300	Claim Approved. Payment of \$800.00 approved to Hearts of Hope.
Iberville	IBEV15-002	Claim Approved. Payment of \$184.25 approved to Radiology Associates (N.O.). Payment of \$123.75 approved to Radiology Associates (N.O.). Payment of \$46.75 approved to Radiology Associates (N.O.). Payment of \$19.25 approved to Radiology Associates (N.O.). Payment of \$501.15 approved to Professional Emerg. Phys. Assoc. Payment of \$213.95 approved to FMOLHS. Payment of \$241.39 approved to Acadian Ambulance. Payment of \$500.00 approved to Acadian Ambulance.
Jefferson	JEFF15-011	Claim Approved. Payment of \$10,000.00 approved to East Jefferson General Hosp.
Jefferson	JEFF16-002	Claim Approved. Payment of \$1,735.00 approved to University Med Ctr Mgmt Corp.
Jefferson	JEFF16-024	Claim Approved. Payment of \$5,000.00 approved to the claimant.
Jefferson	JEFF17-002	Claim Approved. Payment of \$5000.00 approved to the claimant.
Jefferson	JEFF18-009	Claim Approved. Payment of \$10,000.00 approved to the claimant.
Jefferson	JEFF18-014	Emergency Award Confirmed.
Jefferson	JEFF18-015	Emergency Award Confirmed.
Jefferson	JEFF18-016	Emergency Award Confirmed.
Jefferson	JEFF18-017	Emergency Award Confirmed.
Jefferson	JEFF18-018	Emergency Award Confirmed.
Jefferson	JEFF18-750	Claim Approved. Payment of \$575.12 approved to CARE Center.
Jefferson	JEFF19-002	Emergency Award Confirmed.

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Jefferson	JEFF19-300	Claim Approved. Payment of \$1,000.00 approved to CARE Center.
Jefferson	JEFF19-301	Claim Approved. Payment of \$598.30 approved to CARE Center.
Jefferson	JEFF19-302	Claim Approved. Payment of \$1,000.00 approved to University Medical Ctr – N.O.
LaSalle	LASA15-001	Claim Approved. Payment of \$3,982.14 approved to Hartner Medical Center – Olla. Payment of \$498.30 approved to Hardtner Medical Center – Olla.
Lafayette	LAF15-008	Claim Approved. Payment of \$170.00 approved to Acadian Ambulance. Payment of \$1,011.67 approved to Acadiana Acute Care Associates. Payment of \$4,968.94 approved to the claimant. Payment of \$32.36 approved to Acadiana Radiology Group, LLC. Payment of \$1,255.83 approved to Our Lady of Lourdes RMC.
Lafayette	LAF16-005	Claim Approved. Payment of \$5,116.50 approved to the claimant.
Lafayette	LAF16-011	Claim Approved. Payment of \$1,701.70 approved to the claimant.
Lafayette	LAF16-015	Claim Approved. Payment of \$4,196.32 approved to the claimant.
Lafayette	LAF16-020	Claim Approved. Payment of \$5,000.00 approved to the claimant.
Lafayette	LAF16-024	Eligibility was Approved but the claims were deferred until proper documentation is submitted (itemized invoices and Medicaid payments/denials).
Lafayette	LAF16-027	Claim Approved. Payment of \$5,000.00 approved to the claimant.
Lafayette	LAF16-029	Claim Approved. Payment of \$5,000.00 approved to the claimant.
Lafayette	LAF17-014	Claim Approved. Payment of \$7,914.56 approved to Lafayette General Medical Ctr. Payment of \$300.00 approved to Acadian Ambulance. Payment of \$96.22 approved to Acadian Ambulance. Payment of \$9.43 approved to Ochsner Health System. Payment of \$1,300.00 approved to the claimant. Payment of \$45.85 approved to Acadiana Urology. Payment of \$333.94 approved to Parish Anesthesia of Lafayette.
Lafayette	LAF18-018	Claim Approved. Payment of \$97.50 approved to Acadiana Medical Psychological. Payment of \$118.03 to FMOLHS. Payment of \$593.70 approved to Acadian Ambulance.

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		Payment of \$,7970.19 approved to the claimant.
Lafayette	LAF19-300	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-301	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-302	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-303	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-304	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-305	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-306	Claim Approved. Payment of \$500.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-307	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-308	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-309	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-310	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-311	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-312	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-313	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafayette	LAF19-314	Claim Approved. Payment of \$800.00 approved to Hearts of Hope -- SANE.
Lafourche	LAFO15-003	Claim Approved. Payment of \$1,337.25 approved to Ochsner St. Anne Gen Hospital. Payment of \$343.75 approved to St. Anne ER Group.
Lincoln	LINC19-300	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
Lincoln	LINC19-301	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
Livingston	LIVI16-004	Claim Approved. Payment of \$4,500.00 approved to Greenoaks Funeral Home.
Livingston	LIVI18-392	Claim Approved. Payment of \$358.97 approved to Our Lady of the Lake RMC.

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Livingston	LIVI19-001	Emergency Award Confirmed.
Livingston	LIVI19-002	Emergency Award Confirmed.
Livingston	LIVI19-003	Emergency Award Confirmed.
Livingston	LIVI19-004	Emergency Award Confirmed.
Livingston	LIVI19-005	Emergency Award Confirmed.
Livingston	LIVI19-007	Emergency Award Confirmed.
Livingston	LIVI19-301	Claim Approved. Payment of \$500.00 approved to EBRPCO – SANE Program.
Morehouse	MORE19-300	Claim Approved. Payment of \$1,000.00 approved to St. Francis Medical Center.
Morehouse	MORE19-300	Claim Approved. Payment of \$400.00 approved to Forensic Nurse Examiners.
Natchitoches	NATC19-300	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
Natchitoches	NATC19-301	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
Orleans	ORLE15-004	Claim Approved. Payment of \$560.00 approved to City of New Orleans EMS.
Orleans	ORLE15-111	Claim Approved. Payment of \$66.00 approved to LSU Healthcare Network – N.O. Payment of \$475.86 approved to University Med Ctr Mgt. Corp. Payment of \$92.95 approved to Emory Medical Care Foundation. Payment of \$231.18 approved to the claimant. Payment of \$415.50 approved to City of New Orleans EMS.
Orleans	ORLE16-016	Claim Approved. Payment of \$1,292.00 approved to the claimant.
Orleans	ORLE16-043	Claim Approved. Payment of \$2,061.00 approved to Majestic Mortuary Service. Payment of \$245.16 approved to the claimant.
Orleans	ORLE16-054	Emergency Award Confirmed.
Orleans	ORLE16-074	Claim Approved. Payment of \$4,500.00 approved to the claimant.
Orleans	ORLE16-081	Claim Approved. Payment of \$4,500.00 approved to the claimant.
Orleans	ORLE16-095	Claim Approved. Payment of \$5,000.00 approved to the claimant.
Orleans	ORLE16-828	Claim Approved. Payment of \$144.17 approved to the claimant. Payment of \$426.00 approved to City of New Orleans EMS.
Orleans	ORLE17-012	Claim Approved. Payment of \$5,000.00 approved to the claimant.

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Orleans	ORLE17-080	Claim Denied. The claimant had no personal losses.
Orleans	ORLE17-099	Emergency Award Confirmed.
Orleans	ORLE18-124	Claim Approved. Payment of \$598.30 approved to CARE Center.
Orleans	ORLE18-125	Claim Approved. Payment of \$1,414.60 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-126	Claim Approved. Payment of \$1,000.00 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-127	Claim Approved. Payment of \$50.00 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-128	Claim Approved. Payment of \$448.66 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-129	Claim Approved. Payment of \$687.57 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-130	Claim Approved. Payment of \$1,000.00 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-131	Claim Approved.
Orleans	ORLE18-133	Claim Approved. Payment of \$1,000.00 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-134	Claim Approved. Payment of \$967.90 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-135	Claim Approved. Payment of \$2,078.82 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-136	Claim Approved. Payment of \$1,000.00 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-137	Claim Approved. Payment of \$462.00 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-138	Claim Approved. Payment of \$946.12 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-139	Claim Approved. Payment of \$960.65 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-141	Claim Approved. Payment of \$1,782.92 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-144	Claim Approved. Payment of \$345.69 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-145	Claim Approved. Payment of \$115.50 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-146	Claim Approved. Payment of \$649.36 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-147	Claim Approved. Payment of \$1,069.85 approved to University Medical Ctr. – N.O.

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Orleans	ORLE18-148	Claim Approved. Payment of \$854.02 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-150	Claim Approved. Payment of \$961.40 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-151	Claim Approved. Payment of \$115.50 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-152	Claim Approved. Payment of \$115.50 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-159	Claim Approved. Payment of \$134.20 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-160	Claim Approved. Payment of \$115.30 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-287	Claim Approved. Payment of \$2,111.55 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-289	Claim Approved. Payment of \$2,221.41 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-290	Claim Approved. Payment of \$2,450.48 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-292	Claim Approved. Payment of \$75.00 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-293	Claim Approved. Payment of \$238.66 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-294	Claim Approved. Payment of \$468.97 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-297	Claim Approved. Payment of \$1,000.00 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-299	Claim Approved. Payment of \$618.36 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-985	Claim Approved. Payment of \$115.50 approved to University Medical Ctr. – N.O.
Orleans	ORLE18-986	Claim Approved. Payment of \$115.50 approved to University Medical Ctr. – N.O.
Orleans	ORLE19-004	Emergency Award Confirmed.
Orleans	ORLE19-010	Emergency Award Confirmed.
Orleans	ORLE19-012	Emergency Award Confirmed.
Orleans	ORLE19-013	Emergency Award Confirmed.
Orleans	ORLE19-014	Emergency Award Confirmed.
Orleans	ORLE19-017	Emergency Award Confirmed.
Orleans	ORLE19-018	Emergency Award Confirmed.
Orleans	ORLE19-020	Emergency Award Confirmed.

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Orleans	ORLE19-022	Emergency Award Confirmed.
Orleans	ORLE19-029	Emergency Award Confirmed.
Orleans	ORLE19-030	Emergency Award Confirmed.
Orleans	ORLE19-032	Emergency Award Confirmed.
Orleans	ORLE19-033	Emergency Award Confirmed.
Orleans	ORLE19-300	Claim Approved. Payment of \$751.19 approved to Crisis Center Inc.
Orleans	ORLE19-301	Claim Approved. Payment of \$613.75 approved to CARE Center.
Orleans	ORLE19-309	Claim Approved. Payment of \$2,814.86 approved to University Medical Ctr. – N.O.
Ouachita	OUAC19-300	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
Sabine	SABI19-300	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
St. Charles	CHAR15-033	Claim Approved. Payment of \$274.45 approved to St. Charles Parish Hospital.
St. Charles	CHAR16-022	Claim Approved. Payment of \$300.20 approved to the claimant.
St. Charles	CHAR17-019	Claim Approved. Payment of \$5,000.00 approved to the claimant.
St. Charles	CHAR17-020	Claim Approved. Payment of \$225.00 approved to YNG Counseling/Consulting.
St. Charles	CHAR19-001	Emergency Award Confirmed.
St. Helena	HELE13-001	Claim Approved. Payment of \$3,983.00 approved to MJR Friendly Service F/H. Payment of \$783.75 approved to the claimant.
St. John	JOHN16-002	Claim Approved.
St. Landry	LAND19-300	Claim Approved. Payment of \$800.00 approved to Hearts of Hope – SANE Program.
St. Martin	MART15-004	Claim Approved. Payment of \$3,242.25 approved to University Hospital & Clinics. Payment of \$1,007.60 approved to Congress Emergency Group. Payment of \$273.35 approved to Medical Imaging Assoc. of LA. Payment of \$55.00 approved to LSUHN Billing LLC.
St. Martin	MART19-300	Claim Approved. Payment of \$800.00 approved to Hearts of Hope – SANE Program.
St. Martin	MART19-301	Claim Approved. Payment of \$800.00 approved to Hearts of Hope – SANE Program.
St. Martin	MART19-302	Claim Approved. Payment of \$800.00 approved to Hearts of Hope – SANE Program.

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St. Martin	MART19-303	Claim Approved. Payment of \$800.00 approved to Hearts of Hope – SANE Program.
St. Tammany	TAMM16-006 Aimee Kirst	Claim Approved. Payment of \$1,458.75 approved to Servpro of Slidell.
St. Tammany	TAMM16-006 E. Kurst	Claim Approved. Payment of \$5,000.00 approved to the claimant.
St. Tammany	TAMM19-300	Claim Approved. Payment of \$843.05 approved to CARE Center.
St. Tammany	TAMM19-301	Claim Approved. Payment of \$330.00 approved to CARE Center.
St. Tammany	TAMM19-302	Claim Approved. Payment of \$658.70 approved to CARE Center.
Tangipahoa	TANG17-031	Appeal of 50% Penalty Denied. Contribution – Drugs.
Tangipahoa	TANG18-373	Claim Approved. Payment of \$3,420.10 approved to North Oaks Health System.
Vernon	VERN19-300	Claim Approved. Payment of \$529.50 approved to Vernon Parish Coroner’s Office.
Webster	WEBS19-300	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.
Webster	WEBS19-301	Claim Approved. Payment of \$500.00 approved to Forensic Nurse Examiners.

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## VII OTHER BUSINESS

Mr. Wertz discussed a bill that would disallow a victim's felony history to be used as a denial code.

The Board set the next Board meeting date as June 11, 2019.

Ms. Thibodeaux made a motion to adjourn the meeting. Ms. Kiper seconded the motion. Ms. Tonkovich adjourned the meeting at 11:19 a.m.